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Bib Data Sheet

SERIAL NUMBER 09/648,019	FILING DATE 08/25/2000 RULE _	CLASS 359	GROUP ART UNIT 2633	ATTORNEY DOCKET NO. 23106/77099	
APPLICANTS Kenneth Y. Maxham, Richardson, TX ; ** CONTINUING DATA ***** <i>none</i> ** FOREIGN APPLICATIONS ***** <i>none</i>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>DE</i> Examiner's Signature Initials		STATE OR COUNTRY TX	SHEETS DRAWING 2	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 3
ADDRESS Jessica W Smith Alcatel USA Inc 1000 Coit Rd M/S LEGL 2 Plano ,TX 75075-5813					
TITLE Safety shutdown system for a wdm fiber optic communications network					
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 4564

SERIAL NUMBER 09/648,019	FILING DATE 08/25/2000 RULE	CLASS 359	GROUP ART UNIT 2633	ATTORNEY DOCKET NO. 23106/77099
APPLICANTS Kenneth Y. Maxham, Richardson, TX;				
** CONTINUING DATA ***** <i>none</i>				
** FOREIGN APPLICATIONS ***** <i>none</i>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>D. Maxham</i> Examiner's Signature Initials		STATE OR COUNTRY TX	SHEETS DRAWING 2	TOTAL CLAIMS 9
				INDEPENDENT CLAIMS 3
ADDRESS 24587				
TITLE Safety shutdown system for a wdm fiber optic communications network				
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	